

06-0707

**PART B - FEE(S) TRANSMITTAL**

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7590 05/17/2006

Michael S. Neustel  
 Suite No. 4  
 2534 South University Drive  
 Fargo, ND 58103  
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Amy Kronbeck		(Depositor's name)
<i>Amy Kronbeck</i>		(Signature)
5/30/06		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/632,460	07/31/2003	Donald O. Larson	LARS-013	3799

TITLE OF INVENTION: MEDICAL ARM SECURING DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	08/17/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
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NGUYEN, CAMTU TRAN 3743 128-879000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
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1 \_\_\_\_\_  
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

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Issue Fee  
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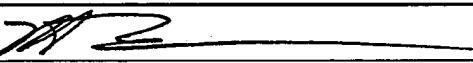
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number \_\_\_\_\_ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature 

Date 5/30/06

Typed or printed name Michael S. Neustel

Registration No. 41,221

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MICHAEL S. NEUSTEL  
Registered Patent Attorney

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May 30, 2006

*Via U.S. Express Mail*

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**Re: Payment of Issue Fee**  
**Serial No.: 10/632,460**  
**Filing Date: 7/31/2003**  
**1<sup>ST</sup> Inventor: Donald Larson**

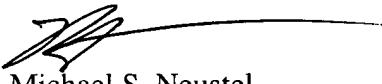
Dear Commissioner:

Please find enclosed the following items:

1. Certificate of Mailing;
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4. Return Postcard Addressed to Neustel Law Offices, LTD.

If you should have any questions, do not hesitate to contact me.

Very truly yours,

  
Michael S. Neustel

Enclosures: As Stated



## CERTIFICATE OF MAILING

In The United States Patent & Trademark Office

In re Application of: **Donald O. Larson**

Serial No.: **10/632,460**

Filed: **Issue Fee**

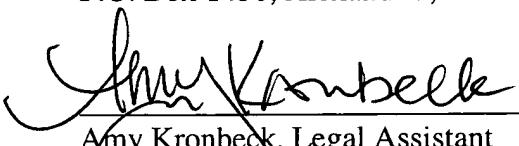
Express Mail Serial No.: **EV808988128US**

For: **Medical Arm Securing Device**

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Date of Deposit: **May 30, 2006**

I hereby certify that the attached United States Issue Fee Transmittal form and the required issue fee are being deposited with the United States Postal Service under Express Mail service on the date indicated above and is addressed to the Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Amy Kronbeck  
Amy Kronbeck, Legal Assistant

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